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SUBJECT: U.S. SUPPORT FOR FIGHTING FLU IN MONGOLIA

¶1. (U) SUMMARY: Mongolia's recent national influenza workshop demonstrated that U.S. support for both a Mongolian influenza surveillance network and an assessment of the country's pandemic readiness is helping the government address several needs. On the surveillance front, U.S. funding has allowed the country to establish critical monitoring centers to monitor the flu situation broadly. A U.S.-supported assessment of the country's readiness has also shown that while Mongolia has made strides in monitoring and battling influenza additional resources are needed to address some shortfalls. END SUMMARY.

¶2. (U) The October 10-11 Fourth National Influenza Workshop highlighted the ongoing joint U.S.-Mongolian "Influenza Surveillance Network", but also addressed the critical issue of the country's influenza pandemic readiness, based in part on an assessment supported by the U.S. Centers for Disease Control (CDC). Specifically, the workshop included extensive discussion on influenza pandemic preparedness planning (IPPP) at the family hospital level and ways to assess local and provincial preparedness.

¶3. (U) The workshop featured 250 participants, including representatives from the World Bank, UNICEF, UN Development Program, CDC, Japanese National Institute of Infectious Disease (NIID), and Mongolian government organizations. The DCM, along with the Mongolian Minister of Health and the head of the Mongolian National Center for Communicable Diseases, provided opening remarks. Three visiting CDC officials also presented during the two-day workshop.

¶4. (U) The U.S.-supported Influenza Surveillance Network began in 2004 with funding from the CDC. Through September 2008, the project has spent USD 1.5 million to establish 79 Influenza Sentinel Surveillance Sites (ISSS) in five regions across Mongolia and in its three biggest cities. The project now covers 55 percent of the country's territory and 62 percent of the population. All ISSS locations provide daily reports on influenza and influenza-like illnesses (ILI), and weekly reports on the morbidity and mortality of locally-collected specimens. Thanks to these sites, in the one-year period from September 2006 to September 2007, the Mongolian Influenza Virology Laboratory collected and processed 7,244 nasopharyngeal samples from the patients with ILI in 79 ISSS.

¶5. (U) With additional CDC support, in April 2008 Mongolia conducted an Influenza Pandemic Preparedness and Planning Assessment. The assessment involved members of the technical working group of National Coordinating Committee on Avian Influenza and Pandemic Influenza. The final report of the assessment, presented at the workshop, determined that on a scale of zero to three (three being best), Mongolia averaged 1.38 in the separate assessment areas: country plan, research and use of findings, communications, epidemiologic capability, laboratory capability, routine influenza surveillance, national respiratory disease surveillance report, outbreak response, resources for containment, community-based interventions, infection control, and health sector pandemic response.

¶6. (U) Observers note that this result suggests that Mongolian

influenza pandemic preparedness is considered at a moderate level. The weakest points are the lack of resources for containment and for health sector pandemic response. The U.S.-backed IPPP assessment was therefore considered a useful tool for targeting improvements of Mongolia's future plans and actions. Equally important to Mongolia will be making similar assessments at the sub-national level to obtain more efficient results.

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